

ISSUE SLIP STAPLE HERE (For additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PA	70385	
O.I.P.E. CLASSIFIER		8	11-399
FORMALITY REVIEW		69916	11-10-99

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
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2	17-09
3	22-03
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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